

County: Clark  
NEILLSVILLE MEMORIAL HOME  
216 SUNSET PLACE

Facility ID: 6010

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NEILLSVILLE 54456 Phone: (715) 743-3101  
Operated from 1/1 To 12/31 Days of Operation: 365  
Operate in Conjunction with Hospital? Yes  
Number of Beds Set Up and Staffed (12/31/01): 120  
Total Licensed Bed Capacity (12/31/01): 135  
Number of Residents on 12/31/01: 103

Ownership:  
Highest Level License: Non-Profit Corporation  
Operate in Conjunction with CBRF? Skilled  
Title 18 (Medicare) Certified? No  
Title 19 (Medicaid) Certified? Yes  
Average Daily Census: 103

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Services Provided to Non-Residents		Age, Sex, and Primary Diagnosis of Residents (12/31/01)				Length of Stay (12/31/01)		%
Home Health Care	Yes	Primary Diagnosis	%	Age Groups	%	Less Than 1 Year		26.2
Supp. Home Care-Personal Care	No					1 - 4 Years		42.7
Supp. Home Care-Household Services	No	Developmental Disabilities	1.0	Under 65	1.0	More Than 4 Years		31.1
Day Services	No	Mental Illness (Org./Psy)	9.7	65 - 74	4.9			-----
Respite Care	Yes	Mental Illness (Other)	17.5	75 - 84	35.9			100.0
Adult Day Care	No	Alcohol & Other Drug Abuse	0.0	85 - 94	41.7	*****		
Adult Day Health Care	No	Para-, Quadra-, Hemiplegic	1.9	95 & Over	16.5	Full-Time Equivalent		
Congregate Meals	No	Cancer	1.9		-----	Nursing Staff per 100 Residents		
Home Delivered Meals	No	Fractures	1.9		100.0	(12/31/01)		
Other Meals	No	Cardiovascular	9.7	65 & Over	99.0	-----		
Transportation	No	Cerebrovascular	15.5		-----	RNs		6.5
Referral Service	No	Diabetes	10.7	Sex	%	LPNs		6.1
Other Services	No	Respiratory	8.7		-----	Nursing Assistants,		
Provide Day Programming for		Other Medical Conditions	21.4	Male	22.3	Aides, & Orderlies		
Mentally Ill	No		-----	Female	77.7			
Provide Day Programming for			100.0		-----			
Developmentally Disabled	No				100.0			

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#### Method of Reimbursement

Level of Care	Medi care (Title 18)			Medi caid (Title 19)			Other		Pri vate Pay			Fami ly Care			Managed Care			Total Resi - dents	% Of All	
	No.	%	Per Di em (\$)	No.	%	Per Di em (\$)	No.	%	Per Di em (\$)	No.	%	Per Di em (\$)	No.	%	Per Di em (\$)	No.	%			Per Di em (\$)
Int. Skilled Care	0	0.0	0	1	1.3	110	0	0.0	0	1	4.5	131	0	0.0	0	0	0.0	0	2	1.9
Skilled Care	5	100.0	168	70	92.1	93	0	0.0	0	21	95.5	119	0	0.0	0	0	0.0	0	96	93.2
Intermediate	---	---	---	5	6.6	77	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	5	4.9
Limited Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Personal Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Residential Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Dev. Disabled	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Traumatic Brain Inj	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Ventilator-Dependent	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Total	5	100.0		76	100.0		0	0.0		22	100.0		0	0.0		0	0.0		103	100.0

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Admissions, Discharges, and Deaths During Reporting Period		Percent Distribution of Residents' Conditions, Services, and Activities as of 12/31/01				
				% Needing Assistance of One Or Two Staff	% Totally Dependent	Total Number of Residents
Percent Admissions from		Activities of	%			
Private Home/No Home Health	15.4	Daily Living (ADL)	Independent			
Private Home/With Home Health	0.0	Bathing	0.0	56.3	43.7	103
Other Nursing Homes	1.9	Dressing	17.5	50.5	32.0	103
Acute Care Hospitals	80.8	Transferring	25.2	48.5	26.2	103
Psych. Hosp. -MR/DD Facilities	0.0	Toilet Use	23.3	38.8	37.9	103
Rehabilitation Hospitals	1.0	Eating	73.8	20.4	5.8	103
Other Locations	1.0	*****				
Total Number of Admissions	104	Continence	%	Special Treatments		%
Percent Discharges To:		Indwelling Or External Catheter	13.6	Receiving Respiratory Care		1.9
Private Home/No Home Health	63.1	Occ/Freq. Incontinent of Bladder	38.8	Receiving Tracheostomy Care		0.0
Private Home/With Home Health	0.0	Occ/Freq. Incontinent of Bowel	22.3	Receiving Suctioning		0.0
Other Nursing Homes	4.9			Receiving Ostomy Care		0.0
Acute Care Hospitals	0.0	Mobility		Receiving Tube Feeding		1.9
Psych. Hosp. -MR/DD Facilities	0.0	Physically Restrained	11.7	Receiving Mechanically Altered Diets		56.3
Rehabilitation Hospitals	1.0					
Other Locations	7.8	Skin Care		Other Resident Characteristics		
Deaths	23.3	With Pressure Sores	2.9	Have Advance Directives		97.1
Total Number of Discharges		With Rashes	0.0	Medications		
(Including Deaths)	103			Receiving Psychoactive Drugs		50.5

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Selected Statistics: This Hospital-Based Facility Compared to Similar Facilities & Compared to All Facilities

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	This Facility	Other Hospital-Based Facilities		All Facilities	
	%	%	Ratio	%	Ratio
Occupancy Rate: Average Daily Census/Licensed Beds	76.0	88.1	0.86	84.6	0.90
Current Residents from In-County	86.4	83.9	1.03	77.0	1.12
Admissions from In-County, Still Residing	25.0	14.8	1.69	20.8	1.20
Admissions/Average Daily Census	101.0	202.6	0.50	128.9	0.78
Discharges/Average Daily Census	100.0	203.2	0.49	130.0	0.77
Discharges To Private Residence/Average Daily Census	63.1	106.2	0.59	52.8	1.20
Residents Receiving Skilled Care	95.1	92.9	1.02	85.3	1.12
Residents Aged 65 and Older	99.0	91.2	1.09	87.5	1.13
Title 19 (Medicaid) Funded Residents	73.8	66.3	1.11	68.7	1.07
Private Pay Funded Residents	21.4	22.9	0.93	22.0	0.97
Developmentally Disabled Residents	1.0	1.6	0.62	7.6	0.13
Mentally Ill Residents	27.2	31.3	0.87	33.8	0.80
General Medical Service Residents	21.4	20.4	1.05	19.4	1.10
Impaired ADL (Mean)*	50.7	49.9	1.02	49.3	1.03
Psychological Problems	50.5	53.6	0.94	51.9	0.97
Nursing Care Required (Mean)*	7.9	7.9	1.00	7.3	1.08